

CITY OF HOUSTON

Department of Finance & Administration

Application for Certificate of Registration for Solicitation of Funds For Charitable Purposes

Registration Fee: _____ 20_____

Certificate Number: _____

TO THE DIRECTOR OF FINANCE AND ADMINISTRATION, HOUSTON, TEXAS:

THE UNDERSIGNED HEREBY MAKES APPLICATION FOR A CERTIFICATE OF REGISTRATION TO ENGAGE IN THE SOLICITATION OF FUNDS FOR CHARITABLE PURPOSES WITHIN THE CITY OF HOUSTON UNDER ARTICLE IV OF CHAPTER 37 OF THE CODE OF ORDINANCES OF HOUSTON, TEXAS, AND IN CONNECTION WITH SUCH APPLICATION MAKES THE FOLLOWING STATEMENTS AND REPRESENTATIONS:

1. The Full Name of the Person Registering (registrant) is: _____

2. The Registrant is an: (a) Individual (b) Partnership (c) Corporation or (d) Association (Circle One.)

According to your answer in Question #2 above, complete one of the following:

A. INDIVIDUAL:

Business or residence address: _____
(P.O. BOX will not be accepted)

Business or residence telephone no.: _____

B. IF PARTNERSHIP:

Names of Partners	Business Address (P.O. Box Not Accepted)	Telephone No.
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

C. CORPORATION:

Organized under Texas Law ____ Foreign Law ____ (Check one) According to your answer complete 1 or 2 below:

1) IF A TEXAS CORPORATION:

Mailing Address: _____
(P.O. BOX will not be accepted)

Business Location: _____

Telephone No.: _____

Individual in charge of Houston office: _____

Names of Officers and Directors or Trustees:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2) IF A FOREIGN CORPORATION:

Mailing Address: _____
(P.O. BOX will not be accepted)

Business Location: _____

Business Telephone No.: _____

Place of Incorporation: _____

Individual in Charge of Houston office: _____

[illegible]

Location (If multi state) of Principal Headquarters: _____

Mailing Address (if multi state) of Principal Headquarters: _____

Principal Local Business Address: _____

Principal Local Mailing Address: _____ (P.O. BOX will not be accepted)

Principal Business Telephone No.: _____

Names and principal business or residence address (P.O. BOX will not be accepted) and telephone numbers of all members of the association. (If the number exceeds 10, you may alternatively list the names and principal business address of the officers and directors or trustees.)

Names of
Members/Officers/Directors
(whichever applies)

Business Address

Telephone No. _____

[illegible]

3. Give a brief description of the charitable purpose for which the funds are to be solicited, and an explanation of the intended use of the funds toward that purpose: _____

4. List the individuals authorized to incur expenses on behalf of the Registrant related to the solicitation or to disburse any proceeds of the solicitation.

Names

Mailing Address
(P.O. BOX not accepted)

Telephone No. _____

[illegible]

5. State the name, mailing address and telephone number of each individual having organizational responsibility with respect to the solicitation of funds. If the number exceeds 20, list the 20 individuals with **principal** organizational responsibility with respect to the solicitation of funds.

Name(s)	Mailing Address (P.O. BOX not accepted)	Telephone No.
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(If additional space is necessary use a separate sheet)

6. The solicitation period will commence on or about _____ month _____ day 20____ year
and conclude on or about _____ month _____ day 20____ year

7. Describe the methods and means that will be used to solicit funds: _____

8. The total amount of funds proposed to be collected is: \$ _____

9. Give a projected schedule of salaries, wages, fees, commissions, expenses, and costs that the registrant reasonably believes will be incurred and paid in connection with the solicitation of funds or in connection with their disbursement during the entire period in which solicitation is to be made.

Salaries	Wages	Fees	Commission	Expenses	Cost	TOTAL
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

What percentage of the total amount of funds proposed to be collected will be spent for the costs of solicitation, listed above? Give an estimated percentage _____ %.

10. List the names of other cities outside Harris County, Texas, in which funds have been solicited by registrant for charitable purposes within the last five years. (If the number of cities exceeds 5, registrant may list the 5 most populated cities in which it has solicited funds during the previous 5 years):

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

11. The registrant hereby agrees and affirms that if a Certificate of Registration is granted, such Certificate will not be used as or represented to be an endorsement by the City or any of its officers or employees.

12. List any officer, director, trustee, partner, current agent or employee of the registrant planning to engage in the solicitation of funds who has been convicted of (or incarcerated for any conviction) of a felony or misdemeanor involving moral turpitude within the past 7 years:

Name and Position	Nature of Offense	State of Conviction	Year of Conviction
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

13. If the registrant is unable to provide any of the information requested in items 1-12 above, please explain why the information is not available. _____

14. I prepared and have carefully read this Application for Certificate of Registration. I hereby swear or affirm that every statement made herein is true and correct and that I am authorized to sign this application on behalf of the registrant.

Registrant

*The registration statement must signed: by the Registrant, if the Registrant is an individual; if the Registrant is a partnership, by the partner charged with disbursing the funds solicited; if the Registrant is a corporation or an association, by its officer charged with disbursing the funds solicited.

STATE OF TEXAS X

COUNTY OF TEXAS X

BEFORE ME, the undersigned authority, on this day personally appeared _____, who being by me first duly sworn, upon his oath stated that all of the information given above and all of the answers made to the foregoing questions are within the knowledge of Affiant and are true and correct.

WITNESS my hand and seal of office this the _____ day of _____, A.D., 20_____.

NOTARY PUBLIC IN AND FOR THE STATE
OF TEXAS

My Commission Expires:

PRINTED NAME OF NOTARY .

Each Registrant shall file a **preliminary** closing statement no later than thirty (30) days from the expiration of its Certificate of Registration. It need not be sworn to and any amounts stated thereon may be estimated based upon whatever information is reasonably available to the Registrant at the time it is filed. A Final closing statement shall be filed with the Department of Finance and Administration no later than one hundred and twenty (120) days from the expiration of the Certificate of Registration.

Read and Acknowledged: _____
APPLICANT

CITY OF HOUSTON

Department of Finance & Administration

Solicitation for Charitable Purposes Closing Statement

CHECK ONE:

CHECK ONE:

PRELIMINARY CLOSING _____

FILING THIS FORM, SWORN TO _____

FINAL CLOSING _____

CERTIFIED FINANCIAL STATEMENT
(AUDITED BY CPA) _____

IRS FORM 990 _____

NAME OF PERSON ISSUED CERTIFICATE OF REGISTRATION (Registrant):

Certificate of Registration Number: _____

Date the Solicitation Period Began: _____

Date the Solicitation Period Ended: _____

- I. List the total funds collected \$ _____ and pledged \$ _____ from the solicitation of funds.
- II. State the purpose or purposes (with amount of funds for each purpose) for which such funds have been or will be disbursed by the registrant. The total funds represented by food may be stated either by estimating the monetary value of the food to the nearest multiple of \$100.00 or in the case of bulk items the weight of the food by total pounds.

Purpose	Amount
_____	\$ _____
_____	_____
_____	_____
_____	_____
TOTAL: \$ _____	

- III. List any incurred expenses resulting from the solicitation of funds paid, and unpaid:

	\$ PAID	\$ UNPAID
1. Personnel Services		
a. Salaries	\$ _____	\$ _____
b. Wages	_____	_____
c. Commissions	_____	_____
d. Fees	_____	_____
e. Other _____	_____	_____
2. Housing		
a. Rent	_____	_____
b. Interest on mortgage	_____	_____
c. Utilities	_____	_____
d. Other _____	_____	_____
3. Business overhead		
a. Telephone	_____	_____
b. Postage and supplies	_____	_____
c. Equipment	_____	_____
d. Transportation	_____	_____
e. Insurance	_____	_____
f. Materials used in solicitation _____	_____	_____
g. Professional services	_____	_____
h. Other _____	_____	_____
TOTAL:	\$ _____	\$ _____

(Please Complete Reverse Side.)

IV. List all other anticipated disbursement of collected or pledged funds:

Disbursement of Funds	Projected Date of Disbursement	Amount
_____	_____	\$ _____
_____	_____	_____
_____	_____	_____
_____	_____	_____
TOTAL:		\$ _____

V. If the funds have been or will be kept by the Registrant for more than thirty (30) days before disbursement, give the name of the financial institution, if any, where the funds have been or will be deposited.

I prepared and have carefully read this Application for Certificate of Registration. I hereby swear or affirm that every statement made herein is true and correct and that I am authorized to sign this application on behalf of the registrant.

Registrant

By (signature): _____

Name (typed or printed): _____

Title (if any): _____

STATE OF TEXAS X

COUNTY OF HARRIS X

BEFORE ME, the undersigned authority, on this day personally appeared _____, who being by me first duly sworn, upon his oath stated that all of the information given above and all of the answers made to the foregoing questions are within the knowledge of Affiant and are true and correct.

WITNESS my hand and seal of office this the _____ day of _____, A.D., 19 _____.

NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS

My Commission Expires: _____

Printed name of notary

Each Registrant shall file a **preliminary** closing statement no later than thirty (30) days from the expiration of its Certificate of Registration. It need not be sworn to and any amounts stated thereon may be estimated based upon whatever information is reasonably available to the person registering at the time it is filed. A Final closing statement shall be filed with the Department of Finance and Administration no later than one hundred and twenty (120) days from the expiration of the Certificate of Registration.

Read and Acknowledged: _____
Registrant